# COVID-19: Protecting Health Care Workers' (HCW) Families at Home



#### Key questions answered in this summary

 What steps should health care workers (HCW) caring for COVID-19 patients take to protect their family members and housemates from risk of transmission?

#### Summary of major recommendations

- · HCW should sanitize all items carried during their shift (e.g. cell phone, ID badge, keys, etc.) before leaving the hospital and upon returning home.
- HCW may consider changing their clothes after a shift, either at the hospital or immediately upon arriving home. They may also consider immediately washing their clothing and having dedicated shoes for COVID-19 care that do not enter the home.
- Upon arriving home, HCW may consider bathing immediately.
- HCW should reduce physical contact with family/housemates and use separate utensils, plates, etc., but not fully separate unless ill with COVID-19 or protecting vulnerable family/housemates, due to concerns about HCW's mental health.
- HCW may consider a hotel stay or other residence outside of the home setting for the duration of COVID-19 patient care, especially to protect
  vulnerable family members or housemates, or when ill with COVID-19 if other means of self-isolation are not feasible.

## Public health agency and professional society guidelines on protection of family members at home

Sou rce	Recommendations
ACEP	Prepare a "home decontamination space"
April 16	Before leaving hospital:
16	Sanitize items carried during shift: phone, identification badge, pens, etc.
	Change into clean scrubs/clothes. If soiled clothes must come home, store in an easily washed tote bag
	• During commute, minimize touched surfaces and physically distance from other people After arriving home:
	Immediately go to decontamination space
	Sanitize items brought home from the hospital: phone, identification badge, keys, etc.
	Remove shoes and clothes. Keep them away from others. Launder immediately or sunbathe beforehand
	• Shower or bathe, taking shortest pathway and touching minimal surfaces en route (lights, doorknobs, etc.)
AMA	Thoroughly wash hands immediately after arriving home
April 8	Consider changing clothes and showering immediately after arriving home
	• Use a separate set of utensils, kitchenware, toothbrush, etc., than family/housemates.
	• Unless the health care worker has a confirmed case, do <u>not</u> completely separate from family/housemates; social and emotional support are important for maintaining health care workers' mental health.

ACS	Consider changing clothes and showering immediately after arriving home
April 1	Sanitize cell phone before/during/after patient contact and/or keep in plastic bag during hospital service
	Keep hand sanitizer and disposable gloves for contact with public surfaces, e.g. ATM, vending machines
	Consider reducing physical contact with family members
	Consider hotel accommodations for time-limited hospital service
ECDC	During patient care, wear scrubs and special shoes that remain in the hospital
March 31	After shift, remove PPE, meticulously wash hands, and, if possible, shower before leaving the hospital
	Regularly disinfect electronic devices in hospital, especially if used by many people
	At home, health care workers and family/housemates should practice physical distancing
	At home, frequently wash hands and clean shared surfaces, especially in car
	At home, high-risk family/housemates may consider sleeping in separate room and using separate bathroom
IDSA	Infection prevention guidelines pending
April 21	

At present, the Association of Professionals in Infection Control, American Hospital Association, American College of Physicians, American Thoracic Society, and Society for Healthcare Epidemiology in America offer no specific guidelines for family protection. ACEP–American College of Emergency Physicians

IDSA-Infectious Disease Society of America AMA-American Medical Association ECDC-European Centers for Disease Control ACS-American College of Surgeons

#### Evidence reviews on protection of family members at home

S o u r ce	Recommendations
C E	"We found no evidence regarding self-isolation of asymptomatic healthcare workers from their household.
BM A p	<ul> <li>"In a high-quality review that included social distancing and respiratory viruses in various settings and using various methods, it was concluded that 'The handful of studies (mostly conducted during the SARS epidemic) do not allow us to reach any firm conclusions regarding social distancing."</li> </ul>
ril 20	• "There may be some healthcare workers who might consider self-isolation if they work in a particularly high- risk setting or whose family are considered by the NHS to be at 'increased risk' or 'extremely vulnerable'. Of course, heed must be paid to the possible harms of such an approach, such as the potential impact on mental wellbeing, as well as the fact this may not be practically possible depending on individual circumstances."
	"The comparatively low rates of transmission to household members that were reported in previous
	coronavirus outbreaks should also provide some reassurance."
	• "Current evidence does support hand hygiene, facemasks (both at home and work) and adequate PPE as well as potentially efforts to reduce the number and spread of patient contacts at work to end the risk of onward COVID-19 transmission."

## Medical center guidance on protection of family members at home

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Penn Medicine Not dated	Be selective about the number of items brought to work; only bring home disposable or easy-to-clean items
Not dated	Consider avoiding wearing ties, long sleeves, watches, jewelry, and items not often washed
	Consider carrying essential cards, IDs, etc., in a plastic bag, rather than in a wallet/purse
	Minimize touched surfaces on commute and regularly disinfect surfaces, e.g. steering wheel
	Upon arriving home, consider cleaning or disposing of all items before entering home or directly after; for example, undress outside home, place clothing in washable bag, and immediately place bag in washer
	Consider establishing "zones" in the home to place work items that family/housemates avoid
UCSF	Provides facilities for showering and changing clothes before returning home from shift
April 6	Scrubs are available for COVID-19 care if desired

Source	Recommendations
Mt. Sinai March 29	Only workers involved in procedures (i.e. with bodily fluids) should change clothes before leaving the hospital
	If asymptomatic, the health care worker may interact normally with family/housemates and pets
	Encourage family/housemates to engage in regular hand hygiene and cover nose/mouth when sneezing
MGH	There is no evidence of transmission via clothing when wearing proper PPE or via shoes
March 24	Changing clothes before/after shifts is not necessary for infection control
Cornell March 22	Work with family/housemates to reduce their facial touching; consider encouraging them to wear masks to
	"train" them to reduce facial touching (not for transmission prevention)
	Vigilantly monitor symptoms; treat simple colds as if infected with COVID-19 and self-isolate, if possible
Nebraska March 21	Scrubs are not required or specially indicated for COVID-19 care
	Shoe coverings and head coverings are not recommended PPE
	Contaminated clothing should be specially laundered by hospital; if at home, use warm water

## Medical center guidance relating to temporary support housing

Source	Recommendations
Penn Medicine	For front-line staff who do <b>not</b> have COVID-19:
April 21	• Free housing at a nearby hotel up to 3 days/2 nights; intended for time-limited service
	Discounted housing at other nearby hotels
	Discounted housing at nearby extended-stay hotel or apartment (physicians/nurses only)
Beth Israel April 21	• Free housing in a hotel for all staff who <b>have</b> COVID-19 or who do <b>not</b> have COVID-19 but have special circumstances at home (e.g. person in house who is elderly, immunocompromised, pregnant, or infant)
	• Discounted housing for staff who prefer to stay outside the home, <b>regardless</b> of infection status
Georgetown	Discounted housing in a hotel for staff; relevance of infection status unclear
April 21	Intended for being closer to work or protecting vulnerable family/housemates
Mt. Sinai April 21	• Free housing in a hotel up to 25 days or in an apartment for 30–60 days for front-line staff, <b>regardless</b> of infection status (although offerings may vary by status); discounted housing also available
UCSF	Free housing in a hotel up to 4 days/3 nights for front-line staff, regardless of infection status
April 21	Intended for being nearer to work, preference to self-isolate, or symptomatic self-isolation
Cleveland	Free housing in a hotel up to 7 days for front-line staff, regardless of infection status
April 13	However, staff that become ill during their stay are reassigned hotels
	Intended for protecting family/housemates

USC	Free housing in a hotel or apartment for front-line staff, regardless of infection status
April 1	• intended for self-isolation, protecting family/housemates, or "workers needing a respite"
GWU	Discounted housing in a hotel for staff, regardless of infection status
March 23	Intended for being nearer to work, protecting family/housemates, or self-isolation

#### **Definition of terms**

Guideline: Guidance developed by a professional society or government agency, intended for use at multiple hospitals.

Policy: Guidance developed at a hospital for use at that hospital. It may be based on guidelines or on expert opinion.

## About this report

A Rapid Guidance Summary is a focused synopsis of recommendations from selected guideline issuers and health care systems, intended to provide guidance to Penn Medicine providers and administrators during times when latest guidance is urgently needed. It is not based on a complete systematic review of the evidence. Please see the CEP web site for further details on the methods for developing these reports.

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